

**EPA**United States Environmental Protection Agency  
Washington, DC 20460**Work Assignment**

Work Assignment Number

2-009



Other



Amendment Number:

Contract Number

EP-W-08-054

Contract Period

Award Period 2

Base

Option Period Number 2

Title of Work Assignment/SF Site Name

Hazardous Material Technician

Contractor

Tetra Tech Inc.

Specify Section and Paragraph of Contract SOW

Part B paragraphs 1-5

Purpose:



Work Assignment



Work Assignment Close-Out



Work Assignment Amendment



Incremental Funding



Work Plan Approval

Period of Performance

From 08/01/13 To 07/31/15

Comments: The purpose of this action is to initiate a work assignment for Award Period 2. The contractor shall write a work plan and cost estimate for the activities detailed in the attached Statement of Work for the Award term period. Due to limitation of funds the work assignment ceiling is set at \$50,000 and 500 hours LOE. The contractor is not authorized to exceed these Work Assignment ceilings. All other terms and conditions remain unchanged and in full force and effect.



Superfund

## Accounting and Appropriations Data



Non-Superfund

SFO  
(Max 2)

22

Note: To report additional accounting and appropriations data use EPA Form 1900-89A.

Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code (Max 7)
1										
2										
3										
4										
5										

## Authorized Work Assignment Ceiling

Contract Period:

Cost/Fee:

LOE:

This Action:

\$50,000

500

Total:

\$50,000

500

## Work Plan / Cost Estimate Approvals

Contractor WP Dated:

Cost/Fee:

LOE:

Cumulative Approved:

Cost/Fee:

LOE:

Work Assignment Manager Name Ray Ledbetter

(Signature)

7/1/13

(Date)

Branch/Mail Code:

Phone Number: (702) 784-8008

FAX Number: (702) 784-8001

Project Officer Name

Joann M. Eckelsen

(Signature)

7/1/2013

(Date)

Branch/Mail Code:

Phone Number: (702) 784-8006

FAX Number: (702) 784-8001

Other Agency Official Name

(Signature)

(Date)

Branch/Mail Code:

Phone Number:

FAX Number:

Contracting Official Name

(Signature)

7/2/13

(Date)

Branch/Mail Code: 380K

Phone Number: (202) 564-1679

FAX Number: (202) 655-2557

## **Statement of Work**

**Contract EP-W-08-054**

**Environmental Response Training Program (ERTP) Contract, full & open  
Award Period 2, August 1, 2013 – July 31, 2015**

**Work Assignment 1-009 Hazardous Materials Technicians Courses**

### **Purpose /Background**

The purpose of this WA is to improve the response readiness of U.S. EPA and it's Tribal, State and Local partners training them to be Hazardous Material Technicians (HMT). This is to be done by delivering 4 HMT course offerings. These course offerings provide emergency response personnel with the information and skills needed to recognize, evaluate, and control an incident involving the release or potential release of hazardous materials. The dates and locations of the deliveries will be determined by the Project Officer, in coordination with EPA Regional Training Coordinators.

### **1.0 Task to be performed**

Under this work assignment, the Contractor shall be prepared to present 4 course offerings of the HMT courses. The course offering can be delivered in two ways; a 3 day course that meets the OSHA requirement for 24 hours of training for a Hazardous materials technician. This is the preferred way to give the course since most emergency response personnel have had the awareness and operations level OSHA courses which are prerequisites. Upon request a 5 day course can be given that includes the OSHA awareness and operations training. Either type of delivery shall be considered a course offering. Course offerings include the following activities: provision of equipment, materials, and supplies, personnel travel, equipment shipment, and liaison with regional or state training contacts.

In Accordance with the Performance Work Statement Part B the contractor shall be responsible for the following:

- developing a course schedule for Project Officer approval
- student registration
- schedule of instructors
- presentation of training courses
- improvements to course materials
- maintain course files
- acquiring and maintaining equipment
- issuing student certificates

Improvements to course materials and presentations may be requested by the work Assignment Manager, Ray Ledbetter, through the issuance of written Technical direction.

### **2.0 Deliverables**

An end of course summary with course statistics shall be prepared and delivered electronically at the conclusion of each course and/or exercise.

**3.0 Period of Performance**

The Period of Performance is the duration of the second award fee period. (08/01/2013 to 07/31/2015)

**4.0 Government Furnished Property**

The Contractor shall utilize available EPA equipment provided and shall provide all personnel, and additional equipment and supplies necessary to complete this work assignment. There is no specific list of government furnished property for these courses and exercises.

**5.0 Points of Contact**

Ms. Claudia Armstrong  
1200 Pennsylvania Avenue, NW  
MC: 3805R  
Washington, DC 20460  
P-202-564-6679  
F- 202-565-2558  
Armstrong.Claudia@EPA.gov





United States Environmental Protection Agency  
Washington, DC 20460

## Work Assignment

Work Assignment Number

2-009

☐ Other ☐ Amendment Number:

Contract Number

Contract Period

Title of Work Assignment/SF Site Name

Base

Option Period Number 2

Hazardous Material Technician

Contractor

Tetra Tech Inc.

Specify Section and Paragraph of Contract SOW

Part B, Paragraphs 1 - 5

Purpose:

☐ Work Assignment

☐ Work Assignment Close-Out

Period of Performance

☐ Work Assignment Amendment

☐ Incremental Funding

☒ Work Plan Approval

From 08/01/13 To 07/31/15

Comments: The purpose of this action is to approve the contractor's work plan dated Aug. 21, 2013 for a cost/LOE not to exceed \$163,937 and 845 LOE. Due to limitation of funds the initial ceiling for cost/LOE is set at \$50,000 and 500 hours. All other terms and conditions remain unchanged.

☐ Superfund

Accounting and Appropriations Data

☐ Non-Superfund

Note: To report additional accounting and appropriations data use EPA Form 1900-69A.

SFO  
(Max 2)

22

Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code (Max 7)
1										
2										
3										
4										
5										

### Authorized Work Assignment Ceiling

Contract Period:

Cost/Fee:

LOE:

This Action:

Total:

\$50,000

500 hrs

### Work Plan / Cost Estimate Approvals

Contractor WP Dated: 08/21/13

Cost/Fee: \$163,937.00

LOE: 845 hours

Cumulative Approved:

Cost/Fee:

LOE:

Work Assignment Manager Name: H. Ray Ledbetter

(Signature)

(Date)

Branch/Mail Code:

Phone Number: (702) 784-8005

FAX Number: (702) 784-8001

Project Officer Name: JoAnn M. Eskelsen

(Signature)

(Date)

Branch/Mail Code:

Phone Number: (702) 784-8006

FAX Number: (702) 784-8001

Other Agency Official Name

(Signature)

(Date)

Branch/Mail Code:

Phone Number:

FAX Number:

Contracting Official Name: Claudia Armstrong

(Signature)

(Date)

Branch/Mail Code: 3805R

Phone Number: (202) 564-6679

FAX Number: (202) 565-2558

<b>EPA</b> United States Environmental Protection Agency Washington, DC 20460 <b>Work Assignment</b>		Work Assignment Number 2-009								
		<input type="checkbox"/> Other <input checked="" type="checkbox"/> Amendment Number: 000001								
Contract Number EP-W-08-054	Contract Period   08/01/2008 To   07/31/2015 Base                      Option Period Number   2	Title of Work Assignment/SF Site Name Hazardous Material Technician								
Contractor TETRA TECH, INC.		Specify Section and paragraph of Contract SOW Part B, Paragraphs 1-5								
Purpose: <input type="checkbox"/> Work Assignment <input type="checkbox"/> Work Assignment Close-Out <input checked="" type="checkbox"/> Work Assignment Amendment <input type="checkbox"/> Incremental Funding <input type="checkbox"/> Work Plan Approval		Period of Performance From 08/01/2013 To 07/31/2015								
Comments: The purpose of this action is to raise ceilings for funding and LOE from \$50,000 and 500 Hours to \$100,000 and 845 hours. All other terms and conditions remain unchanged.										
<input type="checkbox"/> Superfund		Accounting and Appropriations Data								
		<input checked="" type="checkbox"/> Non-Superfund								
SFO (Max 2) <input type="checkbox"/>		Note: To report additional accounting and appropriations data use EPA Form 1900-69A.								
Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code (Max 7)
1										
2										
3										
4										
5										
Authorized Work Assignment Ceiling										
Contract Period:		Cost/Fee:		\$50,000.00		LOE:		500		
08/01/2008 To 07/31/2015										
This Action:				50,000.00				345		
Total:				\$100,000.00				845		
Work Plan / Cost Estimate Approvals										
Contractor WP Dated:		8/21/13		Cost/Fee: \$163,937		LOE:		845		
Cumulative Approved:				Cost/Fee: \$163,937		LOE:		845		
Work Assignment Manager Name		Ray Ledbetter				Branch/Mail Code:				
						Phone Number 702-784-8008				
						FAX Number:				
Project Officer Name		Joann Eskelsen				Branch/Mail Code:				
						Phone Number: 702-784-8006				
						FAX Number: 702-784-8001				
Other Agency Official Name						Branch/Mail Code:				
						Phone Number:				
						FAX Number:				
Contracting Official Name		Tia Gatling				Branch/Mail Code:				
						Phone Number: 202-564-3281				
						FAX Number:				



<b>EPA</b> United States Environmental Protection Agency Washington, DC 20460 <b>Work Assignment</b>						Work Assignment Number 2-009	
						<input type="checkbox"/> Other <input checked="" type="checkbox"/> Amendment Number: 000002	
Contract Number EP-W-08-054			Contract Period   08/01/2008   To   07/31/2015 Base                      Option Period Number   2			Title of Work Assignment/SF Site Name Hazardous Material Technician	
Contractor TETRA TECH, INC.				Specify Section and paragraph of Contract SOW Part B, Paragraphs 1-5			
Purpose: <input type="checkbox"/> Work Assignment <input type="checkbox"/> Work Assignment Close-Out <input checked="" type="checkbox"/> Work Assignment Amendment <input type="checkbox"/> Incremental Funding <input type="checkbox"/> Work Plan Approval						Period of Performance  From   08/01/2013   To   07/31/2015	
Comments: The purpose of this action is to close out this work assignment. The contractor shall issue a close out memo listing the final cost and hours used on this work assignment. Until this is received the ceiling for funding shall be reduced from \$100,000 to \$60,00 and the ceiling on hours shall be redud from 845 to 475. All other terms and conditions shall remain unchanged.							
<input type="checkbox"/> Superfund						<input checked="" type="checkbox"/> Non-Superfund	
Accounting and Appropriations Data							
Note: To report additional accounting and appropriations date use EPA Form 1900-69A.							
SFO (Max 2) <input type="checkbox"/>							
Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)    (Cents)    Site/Project (Max 8)    Cost Org/Code (Max 7)
1							
2							
3							
4							
5							
Authorized Work Assignment Ceiling							
Contract Period: 08/01/2008   To   07/31/2015		Cost/Fee:    \$ 100,000		LOE:    845			
This Action:		- 40,000		370			
Total:		\$ 60,000		475			
Work Plan / Cost Estimate Approvals							
Contractor WP Dated:    8/21/13				Cost/Fee:    \$163,937		LOE:    845	
Cumulative Approved:				Cost/Fee:    \$163,937		LOE:    845	
Work Assignment Manager Name    Ray Ledbetter						Branch/Mail Code:	
_____ (Signature)						Phone Number    702-784-8008	
_____ (Date)						FAX Number:	
Project Officer Name    Joann Eskelsen						Branch/Mail Code:	
_____ (Signature)						Phone Number:    702-784-8006	
_____ (Date)						FAX Number:    702-784-8001	
Other Agency Official Name						Branch/Mail Code:	
_____ (Signature)						Phone Number:	
_____ (Date)						FAX Number:	
Contracting Official Name    Tia Gatling						Branch/Mail Code:	
_____ (Signature)						Phone Number:    202-564-3281	
_____ (Date)    3/9/15						FAX Number:	